

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

New Jersey First

ADDRESS (number and street)

Riverfront Plaza Station

PO Box 200597

☐Check if different  
than previously  
reported. (ACC)

Newark

NJ

07102

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00391458

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☒July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Vincent Rigolosi

Signature of Treasurer

Electronically Filed by Vincent Rigolosi

Date

07

13

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
New Jersey First

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2007</span>		87040.26
(b) Cash on Hand at Beginning of Reporting Period .....	86264.79	
(c) Total Receipts (from Line 19) .....	41942.92	76942.92
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	128207.71	163983.18
7. Total Disbursements (from Line 31) .....	66683.46	102458.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	61524.25	61524.25
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

New Jersey First

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4000.00	34000.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	4000.00	34000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	4000.00	39000.00
12. Transfers From Affiliated/Other Party Committees .....	37942.92	37942.92
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	41942.92	76942.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41942.92	76942.92

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	11683.46	22458.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	11683.46	22458.93
22. Transfers to Affiliated/Other Party Committees.....	15000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	35000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	30000.00	30000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	66683.46	102458.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	66683.46	102458.93

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	4000.00	39000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4000.00	39000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11683.46	22458.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11683.46	22458.93

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

A. Thomas Heagney

Mailing Address 115 River Road  
Suite 101

City State Zip Code  
Edgewater NJ 07020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Builder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.5065

Amount of Each Receipt this Period

2200.00

NJ1-2007

Full Name (Last, First, Middle Initial)

B. Edward Imperatore

Mailing Address 105 Serpentine Rd.

City State Zip Code  
Tenafly NJ 07670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harwood Lloyd

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.5000

Amount of Each Receipt this Period

800.00

NJ1-2007

Full Name (Last, First, Middle Initial)

C. William L Mack

Mailing Address 760 Park Avenue

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mack Company

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.4998

Amount of Each Receipt this Period

1000.00

NJ1-2007

SUBTOTAL of Receipts This Page (optional) .....

4000.00

TOTAL This Period (last page this line number only) .....

4000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

<b>A.</b> Full Name (Last, First, Middle Initial) Lautenberg 20 Years Committee Mailing Address Gateway One, 23rd Floor City Newark State NJ Zip Code 07102 FEC ID number of contributing federal political committee. <b>C</b> C00409482 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 37942.92		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> SA12.5030 Amount of Each Receipt this Period 37942.92 Joint Fundraising Proceeds - 2007
<b>B.</b> Full Name (Last, First, Middle Initial) Stanley Bogen Mailing Address 956 5th Avenue City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation SC Bernstein Sr Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 7 <b>Transaction ID:</b> SA12.5030.0 Amount of Each Receipt this Period 4400.00 Joint Fundraising (2007-D-1) <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) James D Demetrakis Mailing Address 1000 Portside Drive 20 City Edgewater State NJ Zip Code 07020 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> SA12.5030.1 Amount of Each Receipt this Period 400.00 Joint Fundraising (2007-D-1) <b>[MEMO ITEM]</b>

SUBTOTAL of Receipts This Page (optional) .....

37942.92

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

**A.** Joyce E Demetrakis

Mailing Address 320 Johnson Avenue

City State Zip Code  
 Englewood NJ 07631

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Edgewater Residential Com-  
mun

Occupation  
Property Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: SA12.5030.2

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-  
1)

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Ara K Hovnanian

Mailing Address 39 Locust Point Road

City State Zip Code  
 Rumson NJ 07750

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
K Hovnanian Companies

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: SA12.5030.3

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-  
1)

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Kevork S Hovnanian

Mailing Address 110 West Front Street

City State Zip Code  
 Red Bank NJ 07701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hovnanian Enterprises Inc

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: SA12.5030.4

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-  
1)

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

A. Tammy S. Murphy

Mailing Address 45 Blossom Cove Road

City State Zip Code  
 Red Bank NJ 07701

FEC ID number of contributing federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: SA12.5030.5

Amount of Each Receipt this Period

5000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. John L Neu

Mailing Address One Jersey Avenue

City State Zip Code  
 Jersey City NJ 07302

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hugo Neu Schnitzer EastOccupation  
Scrap Recycling

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 7

Transaction ID: SA12.5030.6

Amount of Each Receipt this Period

2000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Joan Rehnitz

Mailing Address 211 McClees Road

City State Zip Code  
 Red Bank NJ 07701

FEC ID number of contributing federal political committee.

C

Name of Employer  
Two River Theater CompanyOccupation  
Associate Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: SA12.5030.7

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.** Full Name (Last, First, Middle Initial)  
Robert Rechnitz

Mailing Address 211 McClees Road

City State Zip Code  
Red Bank NJ 07701

FEC ID number of contributing federal political committee.

C

Name of Employer  
Two River Theater CompanyOccupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 7

Transaction ID: SA12.5030.8

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Charles C Carella

Mailing Address 712 Holly Lane

City State Zip Code  
Cedar Grove NJ 07009

FEC ID number of contributing federal political committee.

C

Name of Employer  
Carella ByrneOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA12.5030.9

Amount of Each Receipt this Period

5000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
Harlan Waksal

Mailing Address 85 Stonebridge Road

City State Zip Code  
Montclair NJ 07042

FEC ID number of contributing federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA12.5030.10

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.** Full Name (Last, First, Middle Initial)  
James E Cecchi  
Mailing Address 8 Rennselaer Road

City State Zip Code  
Essex Fells NJ 07021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Carella Byrne

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA12.5030.11

Amount of Each Receipt this Period

5000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
John Agnello  
Mailing Address 52 Hamilton Drive East

City State Zip Code  
North Caldwell NJ 07006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Carella Byrne

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA12.5030.12

Amount of Each Receipt this Period

5000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
John Cali  
Mailing Address 11 Commerce Road

City State Zip Code  
Cranford NJ 07016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cali Futures LLC

Occupation  
Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 7

Transaction ID: SA12.5030.13

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

A. Full Name (Last, First, Middle Initial)

Nicholas Boylan

Mailing Address 29 Cedar Drive

City State Zip Code  
 Allendale NJ 07401

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: SA12.5030.14

Amount of Each Receipt this Period

5000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)

Patti Kurtz

Mailing Address 9 Duck Pond Road

City State Zip Code  
 Alpine NJ 07620

FEC ID number of contributing federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 1 3 / 2 0 0 7

Transaction ID: SA12.5030.15

Amount of Each Receipt this Period

5000.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)

Steven Kalafer

Mailing Address 8 Coach N Four Lane

City State Zip Code  
 Annandale NJ 08801

FEC ID number of contributing federal political committee.

C

Name of Employer  
Flemington Car & TruckOccupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 2 0 / 2 0 0 7

Transaction ID: SA12.5030.16

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-1)

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Suzanne Kalafer

Mailing Address 8 Coach N Four Lane

City

Annandale

State

NJ

Zip Code

08801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: SA12.5030.17

Amount of Each Receipt this Period

400.00

Joint Fundraising (2007-D-1)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

37942.92

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

**A.** Asselta & Company

Mailing Address 604 Quincy Court

City  
Glassboro

State  
NJ

Zip Code  
08028

Purpose of Disbursement  
Fundraising Services

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.5002

Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.** Asselta & Company

Mailing Address 604 Quincy Court

City  
Glassboro

State  
NJ

Zip Code  
08028

Purpose of Disbursement  
Fundraising Services

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.5010

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Asselta & Company

Mailing Address 604 Quincy Court

City  
Glassboro

State  
NJ

Zip Code  
08028

Purpose of Disbursement  
Fundraising Expenses

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.5012

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

186.46

**SUBTOTAL** of Disbursements This Page (optional) .....

4186.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

**A.** Asselta & Company

Mailing Address 604 Quincy Court

City  
Glassboro

State  
NJ

Zip Code  
08028

Purpose of Disbursement  
Travel Expenses

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5012.0

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

174.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Asselta & Company

Mailing Address 604 Quincy Court

City  
Glassboro

State  
NJ

Zip Code  
08028

Purpose of Disbursement  
Fundraising Services

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5017

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Common Sense Consulting

Mailing Address 222 Stony Brook Road

City  
Hopewell

State  
NJ

Zip Code  
08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5003

Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

## **A. Common Sense Consulting**

Mailing Address 222 Stony Brook Road

City Hopewell State NJ Zip Code 08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5011

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Common Sense Consulting**

Mailing Address 222 Stony Brook Road

City Hopewell State NJ Zip Code 08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5020

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Next Level CDS Inc**

Mailing Address PO Box 206

City Piscataway State NJ Zip Code 08855

Purpose of Disbursement  
Fundraising Services

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5018

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

**A. Next Level CDS Inc**

Mailing Address PO Box 206

City  
PiscatawayState  
NJZip Code  
08855Purpose of Disbursement  
Fundraising Expenses

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5021

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	0	7

Amount of Each Disbursement this Period

425.00

Full Name (Last, First, Middle Initial)

**B. Congressional Quarterly Inc**

Mailing Address 1255 22nd Street NW

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Internet Services

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB21B.5021.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	0	7

Amount of Each Disbursement this Period

425.00

**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

425.00

TOTAL This Period (last page this line number only) .....

11611.46

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 20

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

**A.** Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Avenue

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Contribution

Candidate Name

008  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB22.5016

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

15000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

## **A. Friends of Dick Durbin Committee**

Mailing Address PO Box 1949

City  
Springfield

State  
IL

Zip Code  
62705

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.5023

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Reed Committee**

Mailing Address PO Box 8628

City  
Cranston

State  
RI

Zip Code  
02920

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District: 00

Transaction ID: SB23.5022

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

10000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

Full Name (Last, First, Middle Initial)

## **A. New Jersey Democratic State Committee**

Mailing Address 196 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2007 ☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB29.5014

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

## **B. Senate Democratic Majority**

Mailing Address 196 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2007 ☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB29.5007

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

30000.00

**TOTAL** This Period (last page this line number only) .....

30000.00